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PTO/SB/22.(12-04)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 12.136(a) FY 2005 <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		Docket Number (Optional) 024195.000005	
Application Number 09/596,565		Filed: JUNE 19, 2000	
For: <i>System And Methods Of Updated Compact Disc Cards And Graphical User Interface For Updating Same</i>			
Art Unit: 2154		Examiner: JINSONG HU	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
		<u>Fee</u>	<u>Small Entity Fees</u>
<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$120	\$60 \$_____
<input checked="" type="checkbox"/>	Two month (37 CFR 1.17(a)(2))	\$450	\$225 \$ <u>225.00</u>
<input type="checkbox"/>	Three month (37 CFR 1.17(a)(3))	\$1020	\$510 \$_____
<input type="checkbox"/>	Four month (37 CFR 1.17(a)(4))	\$1590	\$795 \$_____
<input type="checkbox"/>	Five month (37 CFR 1.17(a)(5))	\$2160	\$1080 \$_____
<input checked="" type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27.		
<input type="checkbox"/>	A check in the amount of the fee is enclosed		
<input type="checkbox"/>	Payment by credit card. Form PTO-2038 is attached.		
<input type="checkbox"/>	The Director has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/>	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-0259, Attorney Docket No. 024195.000005.</u> I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the <input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).			
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>36,382</u>			
<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____			
_____ Signature		_____ Date	
_____ JEFFREY S. WHITTLE Typed or printed name		_____ 713-221-1185 Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input checked="" type="checkbox"/> Total of <u>1</u> form is submitted.			

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